Immunization Update

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Why are Immunizations Important?

- Most cost-effective and successful public health intervention
 - Effectively prevents disease,
 - Improves the health of populations,
 - Reduces pressures on health care systems
 - Reduces direct and societal costs
- Led to the eradication of smallpox, the near eradication of polio, and the control of other vaccine preventable diseases (Mumps, Measles, Hepatitis B).
- Exposure to vaccine preventable diseases remain (importation from other countries)
- Immunization programs help reduce risk to public



MCDH Immunization Program

- Ill Adm. Code, Section 615.300, Local Health Departments shall conduct a comprehensive infectious disease control program
 - Immunization clinics shall be at a number and frequency to meet needs of community
- Vaccine for Children (VFC)
- Vaccine for Adults (VFA)
- VFC Compliance



Vaccine for Children (VFC) Program

- Response to measles resurgence in the United States
- Federally funded
 - Created by the Omnibus Budget Reconciliation Act of 1993
- Designed to ensure all children were vaccinated by removing the barrier of cost and therefore increase coverage rates

- Impact of program from 1994-2013
 - Vaccine coverage increased to 90%
 - Prevented an estimated
 - 322 million illnesses
 - 21 million hospitalizations
 - 732,000 deaths
 - Estimated Savings of
 - \$295 billion in direct costs
 - \$1.38 trillion in societal costs



Who Qualifies for VFC?

- Medicaid/Managed Care
- Uninsured
- American Indian or Alaskan Native
- Underinsured
 - Only through a Federally Qualified Health Center (FQHC), or Rural Health Clinic (RHC)
 - MCDH is deputized under Lake County Health Department-FQHC.



MCDH VFC Clinics

- Children 6 weeks through 18 years of age
- Monthly offered clinics
 - 5 by appointment only (MCDH Woodstock and Crystal Lake locations)
 - 2 by appointment only offered by Centegra Health System (Together We Can) at Crystal Lake location
 - 6 Walk-In clinics (MCDH Woodstock and Crystal Lake locations)



Vaccines for Adults (VFA) – Section 317 Fund

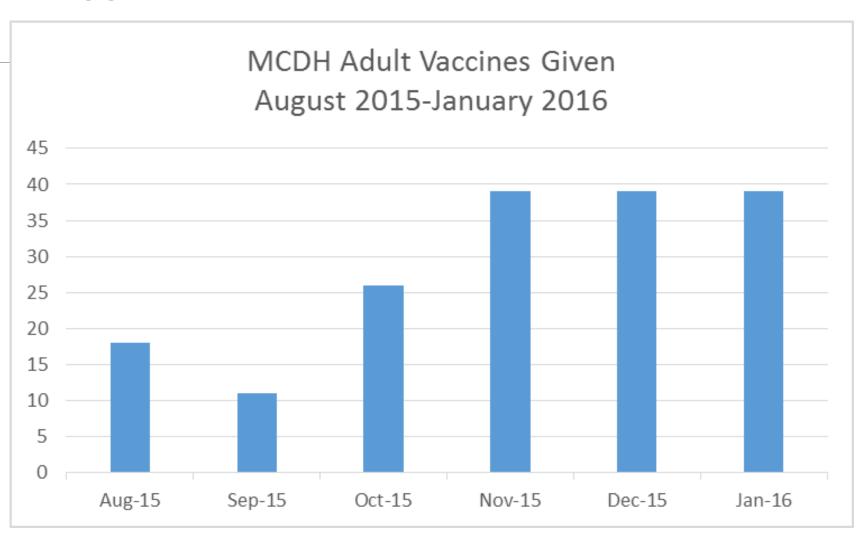
Who Qualifies for 317 Funded Vaccines

- Newborns receiving the birth dose of hepatitis B covered under bundled delivery or global delivery package
- Fully Insured infants of hepatitis B infected women and the household or sexual contacts of hepatitis B infected individuals
- Uninsured or underinsured adults
- Individuals in correctional facilities and jails
- Fully insured individuals seeking vaccines during public health response activities including:
 - Outbreak response
 - Post-exposure prophylaxis
 - Disaster relief efforts
 - Mass vaccination campaigns or exercises for public health preparedness



MCDH VFA Clinics

- Started in August,2015
- •6 Walk-In Clinics offered every month
- •19 years of age and older







Illinois Comprehensive Automated Immunization Registry Exchange

VFC Compliance

•Goals:

- Promote VFC vaccine and recruit providers to carry VFC vaccine
- Promote and assist in use of State Immunization Registry (I-CARE)
- Provide education to providers on vaccine management
 - Reduce waste
 - Assure viability (Appropriate Storage) of vaccines
- Monitor accountability in delivering vaccine
- Monitor compliance with vaccine management



VFC Compliance

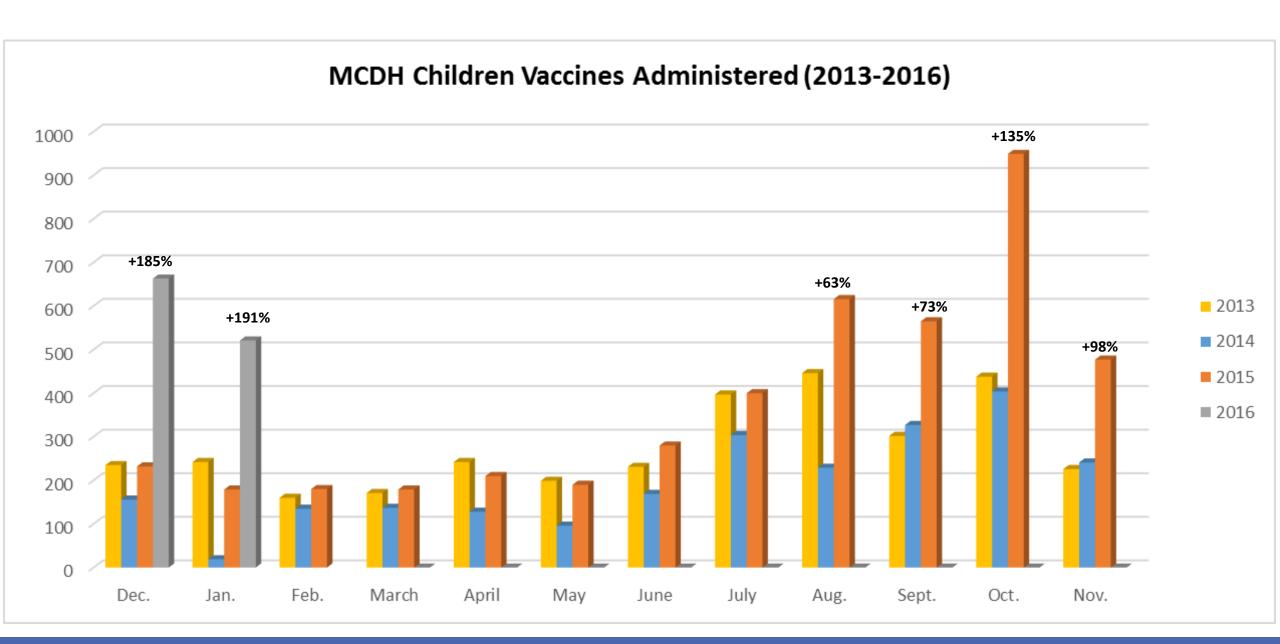
- •VFC provider visits are conducted by Immunization compliance staff employed by the IDPH or by staff from key local health departments who have been trained by IDPH and are authorized to act as delegates of the IDPH to perform these visits
- •MCDH provides compliance visits to McHenry and Boone County providers
- Providers having deficits in vaccine management and/or inventory accountability
 - IDPH will place provider on hold from ordering vaccine
 - Visit conducted to provide education or assist in identifying problem
 - IDPH can recover financial loss of vaccine from providers
- •When private providers are on hold, patient's are referred to MCDH for vaccines.



MCDH Immunization Impact

- Centegra CPC and several other VFC private physician practices on hold starting 3/2015 to present.
- Transitioned to Communicable Disease Program July, 2015
 - Clinics were all by appointment only (7) and were booked 3 months out (Patients and MD offices expressed concern)
 - Opened additional appointment slots and added Walk-in Clinics to meet demand
 - Made procedural changes to improve efficiency of RN and OA staff to accommodate more patients in clinic time frames







Questions?

THANK YOU.

